

Beneficiary Designation / Spousal Consent Form



Hartford Life

Group Number:

Social Security Number:

EMPLOYEE INFORMATION

Employer Name:

Employee Name: Last

First

M.I.

Are you currently married?

☐ No

☐ Yes

If you are married and designate your spouse as the Primary Beneficiary for less than 100% of your death benefit, your spouse must sign the Spousal Consent Agreement below, unless this consent is not deemed applicable by your Plan Administrator. If consent is applicable, you must also complete a QPSA waiver and spousal consent.

Receipt of this form in the offices of your Employer cancels all prior beneficiary designations and spousal consent filed with your Employer for this plan. No change of Beneficiary will take effect until this request has been received by your Employer.

BENEFICIARY INFORMATION

Upon the death of the Participant, all proceeds will be paid to the living beneficiaries in the order specified below. Only the Participant may change the designation. If no Beneficiary is designated, your death benefit will be paid to your spouse or, if unmarried, to the executors or administrators of your estate.

Please type or print the following information for each Beneficiary:

(1) Full Name of Individual or Trust

(2) Address

(3) Social Security Number

(4) Date of Birth

(5) Relationship to the Participant

(6) Percentage of Death Benefit

(7) Date of Trust (if applicable)

Primary Beneficiary (ies):

Contingent Beneficiary (ies):

Please see the following page for examples of proper beneficiary designations.

Employee Signature

Date

SPOUSAL CONSENT AGREEMENT (if applicable)

This notice will certify that, as spouse of the Participant named above, I have consented to my spouse naming the person(s) listed above as Primary Beneficiary(ies) of any death benefits provided by the Plan. I hereby waive any and all rights I may have received under the Plan had this Spousal Consent not been granted.

Spousal Signature

Date

Signature of Witness (Plan Administrator or Notary Public)

Date

Beneficiary Designation

- A. If you are married, the Beneficiary you designate must be your spouse unless your spouse consents in writing, as witnessed by a Notary Public or the Plan Administrator, to designate another beneficiary.
- B. A married woman should be indicated by her given name, not that of her husband. Example, Mary N. Jones, not Mrs. John R. Jones.
- C. Please complete the Beneficiary Designation *including* name, Social Security number, relationship, and percentage of death benefit (totalling 100%).

Listed below are some common beneficiary designations:

Type of Beneficiary:

One Beneficiary

Two or more Primary Beneficiaries,
equally among the survivors

Two or more Primary Beneficiaries,
with their share to their children

Primary and Contingent Beneficiaries

Participant's Estate

Trustee

Examples of Designations:

Jane Doe, wife, 100%

John Doe, son, 33%
Carol Smith, daughter, 33%
Mark Doe, son 34%
or equally among the survivors

John Doe, son, 33%
Carol Smith, daughter, 33%
Mark Doe, son 34%
per stirpes

Jane Doe, wife, 100% if living;
otherwise children
equally among the survivors
per stirpes

Participant's Estate

Jane Doe, trustee under trust
agreement* dated...

***either
or***

* If the word "trustee" is used in a Beneficiary designation, the date of the execution of the trust agreement or a copy of the trust agreement must be furnished.